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Substitute for form 1449/PTO				Complete If Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Application Number	
				Filing Date	
				First Named Inventor	Harald Kofler
				Art Unit	
				Examiner Name	
				Attorney Docket Number	
Sheet	One	of	Two		

U. S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature: [Signature] Date Considered: 12/8/05

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NON-PATENT LITERATURE DOCUMENTS

Examiner Signature	C. L. S.	Date Considered	12/9/05
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1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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